

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	<i>WJ</i>	<i>JO</i>	<i>12-06-01</i>
FORMALITY REVIEW	<i>pp</i>	<i>1020</i>	<i>12-10-01</i>
RESPONSE FORMALITY REVIEW			

**INDEX OF CLAIMS**

- ✓ ..... Rejected
- = ..... Allowed
- (Through numeral) ... Canceled
- ÷ ..... Restricted
- N ..... Non-elected
- I ..... Interference
- A ..... Appeal
- O ..... Objected

Claim	Final	Original	Date
1	✓	8	
2		1	
3		1	
4		1	
5		1	
6		1	
7		1	
8		1	
9		1	
10		1	
11		1	
12		1	
13		1	
14		1	
15		1	
16	✓	1	
17		1	
18		1	
19		1	
20		1	
21		1	
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23		1	
24		1	
25	✓	1	
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46		1	
47	✓	1	
48		1	
49		1	
50		1	

Claim	Final	Original	Date
51		1	
52		1	
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Claim	Final	Original	Date
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12-10-01

If more than 150 claims or 10 actions  
staple additional sheet here

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